



## New Jersey Department of Children and Families Policy Manual

Manual:	CP&P	Child Protection and Permanency	Effective Date:
Volume:	IV	Out of Home Placement	
Chapter:	E	Residential Placement	12-3-2007
Subchapter:	3	Supervision	
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### Case Contact Requirements 8-30-93

The Worker and his or her Supervisor establish, meet, and document case contact requirements per policy and procedures in [CP&P-III-C-3-100](#), Minimum Visitation Requirements (MVRs).

### Contacts with the Child 8-30-93

The Worker has face-to-face contact with the child during home visits or visits to the residential facility. Contact by mail or telephone is also important to the child as the Worker is a link to his family and his eventual discharge.

When the child is able to understand the implications of permanency planning, he is involved in the process and his views are carefully considered.

### Case Planning 12-22-2003

CP&P has the responsibility to ensure that each parent has the opportunity to exercise his rights and responsibilities toward the child in placement. Worker contacts with parents are an integral part of the placement process. A Case Plan, CP&P Form [26-81](#), is developed with the parents. Goals and time frames are established in preparation for the child's return home. Presenting problems in the family requiring or contributing to placement must be addressed. Progress toward alleviating the conditions that necessitated placement is reviewed by the Worker and his supervisor and documented by use of the CP&P Form [26-81](#). Assessment of parent progress is essential in permanency planning for the child. The parent is notified if the child is moved to another facility or placement. See [CP&P-IV-A-3-200](#).

### Parent/Child Visits 8-30-93

The parents are expected to visit the child during placement and are provided transportation assistance if needed. The Worker initiates planning for parent/child visits and enters the parent/child visiting schedule on the Visitation Plan, CP&P Form [26-83](#).

The Worker documents parent/child visits on the Contact Sheet, CP&P Form [26-52](#). When necessary, the Worker facilitates parent/child visits with the family and the residential center.

### **Contacts with Substitute Caregivers 8-30-93**

The approach to contacts with substitute caregivers depends not only on the discharge plans for the child, but the child's previous relationship, if any, to the caregiver.

### **Contacts with the Facility 12-3-2007**

Frequent and continued communication with the facility is essential to monitor the child's progress at the facility. While the facility staff will have primary responsibility for the child's treatment program, usually the Local Office Worker will have primary responsibility for the parent's treatment program. Sometimes the facility is able to work with both the child and parent, but the Local Office Worker is still responsible for overall coordination of activities. CP&P is required by Federal law to ensure that an administrative or court review is completed at least every 6 months on the status of every child in placement. See [CP&P-IV-A-3-200](#).

The Worker is responsible for providing the facility with a copy of CP&P Form [26-81](#), Family Summary/Case Plan, outlining family functioning, plans, cooperation, progress toward meeting goals, etc., every six months. Any significant change in or with the family should be reported immediately to appropriate facility staff by telephone and followed up with a written report. Assessment reports do not preclude telephone and on-site conferences, and attendance at staffings.

The facility is required to provide the Worker with information regarding the child's treatment plan and progress. As soon as possible, but not later than 30 days after initiation of placement, the facility develops, in collaboration with the Worker, a written treatment plan including:

- specific services and treatment procedures for each child;
- a plan of transition for the adolescent (age 14 and above), which addresses the skills necessary to the adolescent's achievement of adult self-sufficiency. See [CP&P-VI-B-1-300](#), Adolescent Services Towards Self-Sufficiency.
- long and short term goals along with psychological, psychiatric, social, and educational plans;
- identification of staff responsible for implementation of treatment goals and time frames for their completion;
- criteria for achievement of each goal; and specific discharge goals and recommendations.

The facility must review and update the treatment plan within 90 days after development and semi-annually, thereafter. The review must be forwarded to the Worker in writing. The Worker and his Supervisor review the treatment plans and progress reports. They consult with the Casework Supervisor for his input when the facility report indicates minimal progress. Other supervisory staff are involved in the case plan review when required by agency policy. See [CP&P-III-B-4-400](#), Case Goals.

The Worker must be invited to staffings and is expected to attend. The Worker documents his attendance at all staffings in NJ Spirit, Case Notes.

The facility must notify the Worker and, if applicable, the parents of every unexpected or unexcused absence, runaway, serious incident, or injury.

### **Procedures Related to Supervision During Placement 12-22-2003**

RESPONSIBILITY	ACTION REQUIRED
Worker and Supervisor	1. Establish, meet, and document case contact requirements per policy and procedures in <a href="#">CP&amp;P-III-C-3-100</a> .
Worker and Parent	2. Complete CP&P Form <a href="#">26-81</a> , Family Summary/Case Plan, and CP&P Form <a href="#">26-83</a> , Visitation Plan, no less frequently than every six months during the period of service delivery.
Worker and Supervisor	3. Send a copy of the case plan to the residential facility every 6 months.
Worker	4. Coordinate parent/child visits and vacations. Document on the Contact Sheet, CP&P Form <a href="#">26-52</a> .
	5. Coordinate parent/child transportation as necessary.
	6. Collaborate with the facility on development of the child's treatment plan.
	7. Attend staffings. Record attendance on Contact Sheet, CP&P Form <a href="#">26-52</a> .
Worker and Supervisor	8. Review treatment plans and progress reports sent from the facility.

Worker, Supervisor, and Casework Supervisor	9. Consult on case plan when facility reports indicate minimal progress.
LO Manager and Regional Staff	10. Review case plan when required by agency policy. See <a href="#">CP&amp;P-III-B-4-400</a> .
Worker and Supervisor	11. Participate in Placement Conference and Child Placement Review Board reviews, per <a href="#">CP&amp;P-IV-A-3-200</a> .
Worker	12. Contact child's school district to request that notification be sent to CP&P of any change in education plan or funding.
	13. Notify child's school district of any relevant changes in CP&P placement or funding plan for the child.
	14. If there is a question as to the correct school district responsible for the child's educational funding, complete the CP&P Form <a href="#">25-65</a> , Department of Education School District Determination.
	15. Re-determine child's Medicaid eligibility every 6 months or whenever a change in child's circumstances requires a review, per <a href="#">CP&amp;P-V-A-2-200</a> .
	16. Notify the child's school district when child leaves residential facility.
	17. Notify Supervisor and the appropriate unit in Central or Area Office in event of critical incidents or serious problems encountered with the residential facility. Follow policy and procedures for critical incidents in <a href="#">CP&amp;P-IX-D-1-100</a> when applicable.